
11/11/2016

Insurance Period 3/01/2022 thru 8/31/2022

Coverage Month	7/2022
Amount Due	\$168.84

MEDICAL ONLY	MEDICAL & DENTAL
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INDIVIDUAL COVERAGE	\$ 708.00	\$736.00
FAMILY COVERAGE	\$1857.00	\$1954.00

If you have any questions concerning this letter, please do not hesitate to contact the Trust Fund Office.

Roger B. Gill
Administrator